THE CERCLA OFF-SITE DISPOSAL REPORT

Information Required for CERCLA Off-Site Waste Management Activities

1. Superfund site name/State/CERCLIS number
   Little Bit Rad / Beaumont, Texas
   CERCLIS # TX0000605291

2. Type of Action (check two)

X	Removal	___	Remedial
X	Fund-financed	___	Fund-financed
___	PRP-financed	___	PRP-financed

3. Type and form of waste; if more than one type, attach separate sheet for this and remaining questions for each type: **Low Level Radioactive Debris**

4. Quantity of waste: **Approx. 60 Cubic Yards**

5. Range, average, and /or representative concentrations of the contaminates of concern:
   Isotope: Americium-241 Activity: 0 – 14,000 pCi/g (USDOT Exempt Waste)
   Reference Attachment Waste Profile

6. Pre-treatment of waste before transportation: **None**

   ___ precipitation ___ neutralization ___ solidification ___ fixation
   ___ stabilization ___ other_____

7. Receiving RCRA facility name/location/ID number/unit(s):
   Envirocare of Utah, Inc / Clive Disposal Site / Clive, Utah

8. Receiving Region: **REGION 8**

9. Receiving Region Off-Site Contact (RRQC). (note - this is the individual designed pursuant to the May 6, 1985 policy.)*

   Name: **Ron Shannon** Date _____

10. Date(s) of Shipments:
    OSC Pat Hammack has copies of signed manifest.

11. Pre-treatment of waste at the site before final treatment or disposal: None

____ precipitation	____ neutralization
____ solidification	____ fixation
____ stabilization	____ other_____

12. Final method of treatment or disposal/unit receiving:

____ precipitation	____ neutralization
____ incineration	__x__ landfill
____ land treatment	____ injection
____ recovery/re-use	____ other :

13. If waste land filled:
-What disposal cell number or location? _____
-Type of liner in cell?(e.g. PVC, Clay hypalon): Clay

14. Cost of activities: OSC HAS PERCENT THRU COED OF ENGINEERS
-Cost based on treatment/disposal only (no transportation cost):____
-Cost for transportation: $ 16,000.00

:enclosures

RADIOACTIVE WASTE PROFILE RECORD

(EC-0230) Revision 2

Generator Name: USEPA REGION VI ; Generator #/Waste Stream #: _____ ; Volume of Waste Material: 45-60YD

Contractor Name: Corp. of Engineers ;Waste Stream Name: Am 241 Debris ;Delivery Date: _____

Check appropriate boxes: Licensed Y☐ N☒; NORM/NARM ☐; LLRW ☒; MW ☐; MW Treated ☐; MW Needing Treatment ☐

PCB Radioactive Y ☐ N ☒; PCB Mixed Waste Y ☐ N ☒; DOE ☐

Original Submission: Y☒ N☐; Revision # _____; Date of Revision _____

Name & Title of Person Completing Form: SCOTT ST. JOHN / TRANSPORTATION AND DISPOSAL COORD. Phone: 817/ 882-8002

A. CUSTOMER INFORMATION:

GENERAL: Please read carefully and complete this form for one waste stream. This information will be used to determine how to properly manage the waste. Should there be any questions while completing this form, contact Envirocare at (801) 532-1330. **WASTES CANNOT BE ACCEPTED AT ENVIROCARE UNLESS THIS FORM IS COMPLETED.** If a category does not apply, please indicate.

1. GENERATOR INFORMATION

EPA ID # TX0000605291 EPA Hazardous Waste Number(s) (if applicable): N/A

Mailing Address: 1445 ROSS AVENUE, DALLAS, TEXAS, 75202

Phone: 214-665-2214 PAT HAMMACK Fax: 214-665-7447

Location of Material (City, ST): BEAUMONT, TEXAS

Generator Contact: PAT HAMMACK Title: FEDERAL ON-SCENE COORDINATOR

Mailing Address (if different from above): _____

Phone: _____ Fax: _____

B. WASTE PHYSICAL PROPERTIES (If you have questions about the remaining sections, please contact Envirocare at (801) 532-1330.)

1. ***PHYSICAL DATA*** *(Indicate percentage of material that will pass through the following grid sizes, e.g., 12" 100%, 4" 96%, 1" 74%, 1/4" 50%, 1/40" 30%, 1/200", 5%.)*

GRADATION OF MATERIAL:

12"	50 %
4"	30 %
1"	10 %
1/4"	5 %
1/40"	3 %
1/200"	1 %

2. **DESCRIPTION:** Color VARIES Odor NONE

Liquid 0% Solid 100% Sludge 0% Powder/Dust 0%

3. **DENSITY RANGE:** (Indicate dimensions) 1800 - 2200 S.G.☐ lb./ft³☐ lb./yd³☒

4. **GENERAL CHARACTERISTICS (% OF EACH)**

Soil 10 Building Debris 90 Rubble 0 Pipe Scale 0 Tailings 0 Process Waste 0 Concrete 1 Plastic/Resin 0

Other constituents and approximate % contribution of each: PPE AND PLASTIC 0 - 2%

5. **MOISTURE CONTENT:** (Use Std. Proctor Method ASTM D-698, for soil or soil-like materials.)

* Optimum Moisture Content: N/A % @ Max Dry Density (lb/ft³): N A

Average Moisture Content: N/A %

* The waste material must not exceed 3 percentage points above optimum moisture upon arrival at Envirocare's disposal site.

Moisture Content Range: N/A % - _____ %

6. **DESCRIPTION OF WASTE:** (Please complete "Attachment B.6, Physical Properties." This attachment must describe the waste with respect to it *physical composition and characteristics).*

C. RADIOLOGICAL EVALUATION.

1. **WASTE STREAM INFORMATION.** Please list the following information for each radioactive isotope associated with the waste. Envirocare's license assumes that short-lived decay products of specified isotopes are present in concentrations equal to the parent. Consequently, these short-lived isotopes are not required to be listed below and do not require manifesting. If more than 6 radionuclides are present, use "Attachment C.1, Radiological Evaluation, Continuation" in lieu of completing this table.

	Isotopes	Concentration Range (pCi/g)			Weighted Avg. per Container (pCi/g)		Isotopes	Concentration Range (pCi/g)			Weighted Avg. per Container (pCi/g)
a.	Am 241	0	to	14000	200	d.			to		
b.			to			e.			to		
c.			to			f.			to		

2. Y☒ N☐ Is the radioactivity contained in the waste material Low-Level Radioactive Waste as defined in the Low-Level Radioactive Waste Policy Amendments Act of 1985 or in DOE Order 5820.2A, Chapter III? **If yes, check "LLRW" block on line 3 of page 1.**

3. Y☐ N☒ **LICENSED MATERIAL:** Is the waste material listed or included on an active Nuclear Regulatory Commission or Agreement State license?

   (If Yes) **TYPE OF LICENSE:** Source ☐; Special Nuclear Material ☐; By-Product ☐; NORM ☐; NARM ☐

   LICENSING AGENCY: _____

4. Y☐ N☒ **SPECIAL NUCLEAR MATERIAL:** Does the waste contain uranium enriched in U-235 or any of the following radionuclides: U-233, Pu-236, Pu-238, Pu-239, Pu-240, Pu-241, Pu-242, Pu-243, or Pu-244? If YES, please complete, sign and attach the "SNM Exemption Certification" form (EC-0230-SNM). Supporting statements, analytical results, and documentation must be included with the submittal.

D. CHEMICAL AND HAZARDOUS CHARACTERISTICS

1. DESCRIPTION AND HISTORY OF WASTE

Please attach a description of the waste to this profile. Include the following as applicable: The process by which the waste was generated. Available process knowledge of the waste. The basis of hazardous waste determinations. A list of the chemicals and materials used in or commingled with the waste; a list of any and all applicable EPA Hazardous Waste Numbers, current or former; and, a list of any and all applicable land-disposal prohibition or hazardous-waste exclusions, extensions, exemptions, effective dates, variances, or delistings. Attach the most recent or applicable analytical results involving the composition of the waste. Attach any product information or treatment standards. Attach any product information or Material Safety Data Sheets associated with the waste. If a category on this Waste Profile Record does not apply, describe why it does not. For any "Y" response, please *provide a description in the form of an Attachment to Items D.1 and .D.2.*

Please describe the history, and include the following:

Y☐ N☒ Was this waste mixed, treated, neutralized, solidified, commingled, dried, or otherwise processed upon generation or at any time thereafter?

Y☐ N☒ Has this waste been transported or otherwise removed from the location or site where it was originally generated?

Y☐ N☒ Was this waste derived from (or is the waste a residue of) the treatment, storage, and/or disposal of hazardous waste defined by 40 CFR 261?

Y☐ N☒ Has this material been treated at any time to meet any applicable treatment standard?

2. LIST ALL KNOWN AND POSSIBLE CHEMICAL COMPONENTS OR HAZARDOUS WASTE CHARACTERISTICS

		(Y)	(N)			(Y)	(N)			(Y)	(N)
a.	Listed HW	☐	☒	b.	"Derived-From" HW	☐	☒	c.	Toxic	☐	☒
d.	Cyanides	☐	☒	e.	Sulfides	☐	☒	f.	Dioxins	☐	☒
g.	Pesticides	☐	☒	h.	Herbicides	☐	☒	i.	PCBs**	☐	☒
j.	Explosives	☐	☒	k.	Pyrophorics	☐	☒	l.	Solvents	☐	☒
m.	Organics	☐	☒	n.	Phenolics	☐	☒	o.	Infectious	☐	☒
p.	Ignitable	☐	☒	q.	Corrosive	☐	☒	r.	Reactive	☐	☒
s.	Antimony	☐	☒	t.	Beryllium	☐	☒	u.	Copper	☐	☒
v.	Nickel	☐	☒	w.	Thallium	☐	☒	x.	Vanadium	☐	☒
y.	Alcohols	☐	☒	z.	Arsenic	☐	☒	aa.	Barium	☐	☒
bb.	Cadmium	☐	☒	cc.	Chromium	☐	☒	dd.	Lead	☐	☒
ee.	Mercury	☐	☒	ff.	Selenium	☐	☒	gg.	Silver	☐	☒
hh.	Benzene	☐	☒	ii.	Nitrate	☐	☒	jj.	Nitrite	☐	☒
kk.	Fluoride	☐	☒	ll.	Oil	☐	☒	mm.	Fuel	☐	☒
nn.	Chelating Agents	☐	☒	oo.	Biological	☐	☒	pp.	Pathogenic	☐	☒
qq.	Asbestos	☐	☒								

Other Known or Possible Materials or Chemicals: _____

** If the waste is regulated by TSCA, please complete, sign, and attach the applicable PCB/Radioactive or PCB Mixed Waste certification form.

3. **ANALYTICAL RESULTS FOR TOXICITY CHARACTERISTIC.** (Please transcribe results on the blank spaces provided. Attach additional sheets if needed, indicate range or worst-case results).

Metals (check one): ☐ Total (mg/kg)		or ☒ TCLP (mg/l)		Organics (check one): ☐ Total (mg/kg)		or ☒ TCLP (mg/l)	
Arsenic	ND	Lead	ND	ALL NON DETECT			
Barium	1.1	Mercury	ND	SEE ATTACHED			
Cadmium	ND	Selenium	ND	ANALYTICAL			
Chromium	ND	Silver	ND				
		Zinc	0.82				

4. **ANALYTICAL RESULTS FOR REQUIRED PARAMETERS:** (Please transcribe results on the blank spaces provided. Attach additional sheets if needed).

Soil pH 7.79 Paint Filter Liquids Test PASS (Pass/Fail) Cyanide Released ND (mg/kg) Sulfide Released ND (mg/kg)

5. **IGNITABILITY (40 CFR 261.21[a][2],[4].)**

Flash Point ≥ 140 °F ☒ °C ☐ Is the waste a RCRA oxidizer? Y☐ N☒

6. **CHEMICAL COMPOSITION** (List all known chemical components and check the applicable concentration dimensions. Use attachments to complete, if necessary.)

Chemical Component	Concentration		Chemical Component	Concentration	
NONE	% ☐	mg/kg ☐		% ☐	mg/kg ☐
	% ☐	mg/kg ☐		% ☐	mg/kg ☐
	% ☐	mg/kg ☐	Halogenic Organic Compounds (HOC) (Sum of the list of HOCs.)		
	% ☐	mg/kg ☐		NONE % ☐	mg/kg ☐

7. **TREATMENT STANDARDS. (FOR MIXED WASTE ONLY).** Describe the waste's applicable treatment standards. Include the EPA Hazardous Waste Numbers and information with respect to the waste's subcategory (e.g., low mercury subcategory), treatability group (e.g. non-wastewaters), treatment standards and concentrations or technology (e.g. 5.7 mg/l selenium extract or INCIN [incineration]), and any applicable exemptions, exclusions, variances, extension, allowances, etc. If additional space is needed, provide an Attachment D.7 to this profile record formatted as below.

EPA HW Number	Subcategory	Treatability Group	Treatability Standard(s) and Concentrations or Technology	Any Exemptions, Variances, Extensions or Exclusions (List 40 CFR reference)
N/A				Y☐ N☐
N/A				Y☐ N☐

E. **REQUIRED CHEMICAL LABORATORY ANALYSIS.** Generator must submit results of analyses of the waste. Results are required from a qualified laboratory for the following analytical parameters unless nonapplicability of the analysis for the waste can be stated and justified in attached statements. Attach all analytical results and QA/QC documentation. **(CAUTION: PRIOR TO ARRANGING FOR LABORATORY ANALYSES, CHECK WITH ENVIROCARE AND LABORATORY REGARDING UTAH LABORATORY CERTIFICATIONS.**

FOR ALL WASTE TYPES: CHEMICAL ANALYSIS: Soil pH (9045), Paint Filter Liquids Test (9095); Reactivity (cyanide and sulfide).

1. **MINIMUM ADDITIONAL ANALYTICAL REQUIRED FOR:**

   a. Non-RCRA Waste (Non Mixed Waste, i.e. LLRW, NORM): TCLP including the 32 organics, 8 metals, and zinc (Zn).

   b. Mixed Waste: Results to show why the waste is hazardous, and the following analytical results:

      (1) TOX (Total Organic Halides SW-846 9020/9022) or volatile & semi-volatile organics (8240~8270, required if TOX >200 mg/kg)

      (2) Applicable concentration-based treatment standards

      (3) Total and Amenable Cyanide, SW-846 9010 or 9012, required if reactive cyanide >20 mg/kg

2. **REQUIRED RADIOLOGICAL ANALYSES:** Please obtain sufficient samples to adequately determine a range and weighted average of activity in the waste. Analyze all waste streams by gamma spectroscopy. Obtain sufficient samples to ensure that results represent the waste. If Uranium, Plutonium, Thorium, or other non-gamma emitting nuclides are present in the material, the waste must be analyzed using radiochemistry to determine the concentration of these additional contaminants in the material. Detailed radiochemistry may be required to fulfill requirements of Item C.4.

3. **PRE-SHIPMENT SAMPLES OF WASTE TO ENVIROCARE**

Once permission has been obtained from Envirocare, please send 5 representative samples of the waste to Envirocare. A completed EC-2000 form must be included with the sample containers. These samples will be used to establish the waste's incoming shipment acceptance parameter tolerances and may be analyzed for additional parameters. Send about two pounds (one liter) for each sample in an air-tight clean unbreakable glass container via United Parcel Post (UPS) or Federal Express to:

Envirocare of Utah, Inc., Attn: Sample Control, Tooele County, Interstate-80, Exit 49, Clive, Utah 84029
(For Federal Express use Zip Code 84083). Phone: (435) 884-0155

4. **LABORATORY CERTIFICATION INFORMATION.** Please indicate below which of the following categories applies to your laboratory data.

a. **Note analytical data that is to represent mixed waste must be Utah certified or from the USEPA. All radiological data used to support the data in Item C.1. must be from a Utah-certified laboratory.**

☒ **UTAH CERTIFIED.** The laboratory holds a current certification for the applicable chemical test methods from the Utah Department of Health insofar as such official certifications are given. **For analytical work done by Utah-certified laboratories,** please provide a copy of the laboratory's current certification letter for each parameter analyzed and each method used for analyses required by this form.

☒ **GENERATOR'S STATE CERTIFICATION.** The laboratory holds a current certification for the applicable chemical parameters from the generator's State insofar as such official certifications are given, or

☒ **GENERATOR'S STATE LABORATORY REQUIREMENTS.** The laboratory meets the requirements of the generator's State or cognizant agency for chemical laboratories.

If using a non-Utah certified laboratory, briefly describe the generator state's requirements for chemical analytical laboratories to defend the determination that the laboratory used meets those requirements, especially in terms of whether the requirements are parameter specific, method specific, or involve CLP or other QA data packages. Note: When process or project knowledge of this waste is applied, additional analytical results may not be necessary to complete Section B, D.2, D.5, or D.6 of this form.

b. ***For analytical work done by laboratories which are not Utah-Certified, please provide the following information:***

State or Other Agency Contact Person	Generator's State	Telephone Number
Lab Contact Person	**Laboratory's State**	**Telephone Number**

F. **CERTIFICATION**

GENERATOR'S CERTIFICATION OF REPRESENTATIVE SAMPLES, ANALYTICAL RESULTS FROM QUALIFIED LABORATORIES, USE OF APPROVED ANALYTICAL AND SAMPLING METHODS, AND ARRANGEMENTS FOR TREATMENT OR NON-PROHIBITED DISPOSAL. I certify that samples representative of the waste described in this profile were or shall be obtained using state- and EPA-approved sampling methods. I also certify that where necessary those representative samples were or shall be provided to Envirocare and to qualified laboratories for the analytical results reported herein. I further certify that the waste described in this record is not prohibited from land disposal in 40 CFR 268 (unless prior arrangements are made for treatment at Envirocare) and that all applicable treatment standards are clearly indicated on this form. I also certify that the information provided on this form is complete, true and correct and is accurately supported and documented by any laboratory testing as required by Envirocare of Utah, Inc. I certify that the results of any said testing have been submitted to Envirocare of Utah, Inc.

Generator's Signature: Patrick L Hannah Title: Senior QSC Date: 11/22/00
(Sign for the above certification)